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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 328 OF	347
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)	¬ •••
	Detailed Summary Page	21b	22 X 23 24 25 28c 29	26 30b
Any information copied from such Reports and State	ments may not be sold or us			
or for commercial purposes, other than using the na				
NAME OF COMMITTEE (In Full)				
$ \; angle$ American Society of Anesthesiolo	gists Political Action	Committee	!	
Full Name (Last, First, Middle Initial)				
A. MIKE THOMPSON FOR CONGR	ESS		Date of Disbursement	
			M M / D D / Y Y Y Y	
Mailing Address 5429 MADISON AVENUE			09 24 2014	
City	State Zip Code			
SACRAMENTO	CA 95841		Transaction ID : D161531	
Purpose of Disbursement 2014 General Contribution		044		
Candidate Name		011	Amount of Each Disbursement this Period	oa
Rep. Mike Thompson		Category/ Type	2500.00	
	ement For: 2014			
Senate	Primary General			
State: CA District: 05	Other (specify) ▼			
Full Name (Last, First, Middle Initial)				
B. MO BROOKS FOR CONGRESS			Date of Disbursement	
			M = M / D = D / Y = Y = Y	
Mailing Address 7610 FOXFIRE DR.			09 24 2014	
City	State Zip Code		Transaction ID : D161516	
HUNTSVILLE Purpose of Disbursement	AL 35802			
2014 General Contribution		011	Amount of Each Disbursement this Perio	od
Candidate Name		Category/	5000.00	
Rep. Mo Brooks	and Fam. 2011	Type	3000.00	_
Office Sought: House Disburs Senate	ement For: 2014 Primary General			
President	Other (specify) ▼			
State: AL District: 05				
Full Name (Last, First, Middle Initial)				
C. TIBERI FOR CONGRESS			Date of Disbursement	
Mailing Address 2931 E Dublin Granville Road			09 17 2014	
				1
City	State Zip Code OH 43231		Transaction ID : D161423	
Columbus Purpose of Disbursement	OH 43231			
2014 General Contribution		011	Amount of Each Disbursement this Perio	od
Candidate Name		Category/	4000.00	
Rep. Pat Tiberi	mant Fau and	Туре	400.00	
Office Sought: House Disburs Senate	ement For: 2014 Primary X General			
President	Other (specify)			
State: OH District: 12				
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SUBTOTAL of Disbursements This Page (optional)		·····•	11500.00	
TOTAL This Period (last page this line number onl	w)			
I	у /			